# **Summary 2007 Consumer Information Report for Nursing Homes**

#### San Luis Medical And Rehabilitation

2305 SAN LUIS PL GREEN BAY, WI 54304 (920)494-5231

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License Number: 3243
Number of Licensed Beds: 133
Medicare Certified? Yes
Medicaid Certified? Yes

Ownership Type: For Profit Partnership

Owner: KINDRED NURSING CENTERS LIMITED PARTNERSHIP

**Staff: Residents** 

	Staff:Residents, by shift, in a two-week time period			
Nursing	(Average number of residents:124)			
Home Staff	Day Shift	Evening Shift	Night Shift	
Nurses	1 Nurse: 14	1 Nurse: 18	1 Nurse:33	
(RNs & LPNs)	Residents	Residents	Residents	
Nurse Aides	1 NA: 9	1 NA: 10	1 NA: 19	
	Residents	Residents	Residents	

<sup>\*</sup>If the number of residents is a "\*" in one of the categories above, there was an average of <1 nurse or NA on the shift. There may have been a combination of part-time RNs, LPNs or NAs on the shift on one or more days during the two-week time period, which could make the average <1. Per Wisconsin Administrative Code, Chapter HFS 132, there must be at least one RN or LPN on duty at all times.

#### **Staff Retention Rates**

Nursing Home Staff	Staff Retention Rates (Percent of staff employed for at least one year)			
	This Home	BROWN	State of Wisconsin	
		County Average	Average	
	(NS=no staff)	(14 homes)	(396 homes)	
Full-time Nurses (RNs)	60%	77%	78%	
Part-time Nurses (RNs)	67%	71%	71%	
Full-time Nurses (LPNs)	100%	88%	80%	
Part-time Nurses (LPNs)	50%	41%	65%	
Full-time Nurse Aides	65%	79%	73%	
Part-time Nurse Aides	72%	59%	57%	

This two-page summary was prepared by the Division of Quality Assurance, Wisconsin Department of Health Services. For questions about this report, call (608)267-7230. See the full Consumer Information Report, 2007 on the internet at <a href="http://dhfs.wisconsin.gov/bqaconsumer/NursingHomes/CIRindex.htm">http://dhfs.wisconsin.gov/bqaconsumer/NursingHomes/CIRindex.htm</a>, or request a copy (after 7/01/08) at (608)266-8368. The report should also be available in the facility.

# Federal Violations Cited in State "Inspection" Surveys for

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#### San Luis Medical And Rehabilitation

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This summary table provides a count of federal violations cited for this nursing home in 2007, by category of violation. County and state averages are shown as comparison data. Surveys are conducted by the State survey agency at least every 9 - 15 months, and may be conducted more often. This home was not cited with Substandard Quality of Care during the year 2007. See the full Consumer Information Report, 2007 for details.

	Federal Violations In 2007			
Federal Regulation Categories*  *Each category consists of many specific regulations. See detail in report.	Total # Cites for This Home	Average # Cites for BROWN County (14 homes)	Average # Cites for State of Wisconsin (396 homes)	
Quality of Care: Provide care that promotes resident's highest level of well-being. Example: Prevent/treat pressure sores.	8	2.6	2.7	
Resident Services: Provide services that meet state standards. Example: Develop a comprehensive care plan for each resident.	3	2	1.5	
Quality of Life: Provide a pleasant, homelike atmosphere. Example: Provide an activities program that meets needs and interests.	1	0.6	.7	
<b>Resident Rights:</b> Assure individual rights. Example: Assure right to personal privacy.	1	0.2	0.3	
Freedom from Restraints/Abuse: Assure freedom from abuse, neglect, or restraints. Example: Assure the right to be free from abuse.	0	0.4	0.4	
Other Administrative Violations	3	0.6	0.4	
<b>Total Violations</b>	16	6.4	6.0	

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#### INTRODUCTION

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San Luis Medical And Rehabilitation 2305 SAN LUIS PL GREEN BAY, WI 54304 (920)494-5231

• License Number: 3243

• BQA Regional Office: Northeastern

• Ownership type is: For Profit Partnership

- The owner of this nursing home (the licensee) is:
   KINDRED NURSING CENTERS LIMITED PARTNERSHIP
- The 2007 Level of Federal Certification for this nursing home is:

Medicare (Title 18) Skilled Nursing Facility (SNF) Medicaid (Title 19) Nursing Facility (NF)

**SECTION 1** of this report describes the numbers and types of **Federal regulation deficiencies** found during surveys conducted in 2007. "Deficiencies" are cited for noncompliance with Federal regulations. This section also compares these numbers to averages for all nursing homes of similar size.

**SECTION 2** provides information about **nursing staff turnover and retention** rates at this nursing home in 2007. It compares these rates to the averages for all nursing homes of similar size.

**APPENDICES** include: **Appendix A** - a list of **resource agencies** for consumers; **Appendix B** – information about how nursing staff turnover & retention rates are calculated; and **Appendix C** - **statewide averages.** 

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Nursing homes in Wisconsin operate under rules enacted by the Federal government (for the Medicare and/or Medicaid programs) and by the State of Wisconsin. Surveyors from the Wisconsin Division of Quality Assurance conduct unannounced inspections at each nursing home at least once every 9 to 15 months to determine if the nursing home complies with all State and Federal rules. State surveyors also conduct follow-up visits to ensure that violations have been corrected, investigate complaints, and conduct other surveys as necessary.

When state surveyors determine that a nursing home is not in compliance with a Federal regulation, the nursing home is cited with a violation or "deficiency". The number and type of violations for surveys conducted in 2007 are described in this report.

The number of Federal regulation deficiencies cited in Wisconsin nursing homes during 2007 surveys ranged from **0** to **48**, with an average of **6.0** cites.

In 2007 survey(s), San Luis Medical And Rehabilitation, GREEN BAY, which has 133 licensed beds, was cited with:

## 16 Federal regulation deficiency(ies)

Statewide, the average number of deficiencies for a nursing home with 100-199 beds was **7.2.** 

In addition, this home was cited with **3** federal building safety violations. The statewide average in 2007 was **5.0** federal building safety violations.

#### **Federal Regulation Deficiencies:**

To determine Federal regulation deficiencies, surveyors use a resident-centered, outcome-based process. Equal emphasis is placed on the quality of care the resident receives and on the quality of the resident's life in the nursing home, and on whether or nor the resident's rights, dignity and privacy are respected. These factors are evaluated by observing residents' care; interviewing residents, families and staff; and reviewing medical records.

If it is determined that a Federal regulation deficiency exists, the deficiency is placed on a grid. Grid placement is based on two measures:

- Severity/Harm, the degree of impact that a deficient practice has on residents at the facility; and
- *Scope/Frequency*, the prevalence of a deficient practice within a facility, or the proportion of residents who were or could have been affected.

All Federal deficiencies fit into one of the following four grid levels, from most to least serious: Immediate Jeopardy, Significant Correction, Correction and Substantial Compliance. If this home had deficiencies at any of the four grid levels in the last survey, those deficiencies are listed below. Each deficiency listed is followed by the abbreviation of its federal regulation category: Quality of Care (QC), Resident Services (RS), Quality of Life (QL), Resident Rights (RR), Freedom from Restraints/Abuse (FRA), and Other Violations (OT). A deficiency may be listed more than once if it was cited more than once during the year.

Certain Federal regulation deficiencies at the Immediate Jeopardy, Significant Correction and Correction grid levels cause a nursing home to be designated as having "Substandard Quality of Care (SQC)". **This home was not designated with SQC during the year 2007. Forty-five Wisconsin homes received the SQC designation in 2007**. SQC deficiencies constitute: immediate jeopardy to resident health or safety; a pattern of or widespread actual harm that is not immediate jeopardy; or widespread potential for more than minimal harm that is not immediate jeopardy, with no actual harm.

**Immediate Jeopardy.** This deficiency exists when a situation caused (or is likely to cause) serious injury, serious harm, impairment or death to a resident receiving care in the facility AND facility practice makes it probable that similar actions, situations, practices, or incidents will occur again. Immediate corrective action is needed. The nursing home received **0 Immediate Jeopardy deficiencies** in 2007.

**Significant Correction.** This deficiency exists when a situation resulted in a negative outcome that compromised a resident's ability to maintain or reach his/her highest

practicable physical, mental, or psychosocial well-being. This nursing home received **3 Significant Correction deficiencies** in 2007.

## HYDRATION - SUFFICIENT FLUID INTAKE (QC) 02/26/2007 LABORATORY SERVICES - PHYSICIAN ORDER (RS) 01/29/2007 SERVICES TO ATTAIN HIGHEST LEVEL OF FUNCTION (QC) 01/29/2007

**Correction.** This deficiency exists when a situation resulted in minimal physical, mental, or psychosocial discomfort to a resident and/or has the potential (not yet realized) to compromise a resident's ability to maintain or reach his/her highest practicable physical, mental, or psychosocial well-being. This nursing home received **9 Correction deficiencies** in 2007.

COMPREHENSIVE CARE PLANS (RS) 02/26/2007
INFECTION CONTROL - LINENS (QC) 02/26/2007
INFLUENZA AND PNEUMOCOCCAL IMMUNIZATION (QC) 02/26/2007
NOTIFICATION OF CHANGES (QC) 02/26/2007
PHARMACY SERVICES (OT) 02/26/2007
PROVIDE MEDICALLY RELATED SOCIAL SERVICES (QL) 05/30/2007
SERVICES TO IMPROVE RANGE OF MOTION (QC) 02/26/2007
SUPERVISION AND DEVICES TO PREVENT ACCIDENTS (QC) 02/26/2007
SUPERVISION AND DEVICES TO PREVENT ACCIDENTS (QC) 04/02/2007

**Substantial Compliance.** This deficiency exists when a situation has the potential for causing only minor negative impact on residents. This nursing home received **4 Substantial Compliance deficiencies** in 2007.

CLINICAL RECORDS COMPLETE/ACCESSIBLE (OT) 01/29/2007 CLINICAL RECORDS COMPLETE/ACCESSIBLE (OT) 05/30/2007 INFORMED OF RIGHTS AND SERVICES AT ADMISSION (RR) 02/26/2007 RESIDENT ASSESSMENT ACCURACY (RS) 02/26/2007

For questions about this report, call (608)267-7230. For further information about violations or more recent surveys, contact the administrator of this facility or the Division of Quality Assurance (608)266-8368.

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This section provides two measures describing the rate of change among nursing employees from January 1, 2007 through December 31, 2007: a "turnover rate" and a "retention rate." The turnover rate is based on new hires during the year as a proportion of total staffing in a category. The retention rate is based on the proportion of staff in a category at the beginning of the year who are still employed by the end of the year. The formulas used to calculate nurse staffing turnover and one-year retention rates are explained in **Appendix B**.

Rates are calculated separately for full-time employees, persons working 37.5 hours or more per week, and part-time employees, persons working less than 37.5 hours per week. An "NS" indicates the nursing home reported having *no staff* in that particular category.

Registered nurses (RNs) are nurses who are licensed and hold a certificate of registration by the State of Wisconsin. In 2007, this nursing home had:

- A turnover rate for full-time RNs of 120%,
  - vs. 32% statewide and 40% across all nursing homes with 100-199 beds.
- A turnover rate for part-time RNs of 33%,

vs. 49% statewide and 50% across all nursing homes with 100-199 beds.

In some cases, the turnover rate might be artificially high because one position changes frequently throughout the year. For example, if a nursing home with ten nurses had one position that was filled by five people throughout the year, the turnover rate is 50% (5 divided by 10) even though nine of the ten nurses did not change. The "retention rate" captures a sense of the stability of staff outside of the positions that changed frequently. In the example just used, the one-year retention rate is 90% (i.e., nine of the ten nurses had worked at least one year).

## In 2007, this nursing home had:

• A retention rate for full-time RNs of 60%,

vs. 78% statewide and 75% across all nursing homes with 100-199 beds.

• A retention rate for part-time RNs of 67%,

vs. 71% statewide and 70% across all nursing homes with 100-199 beds.

Licensed practical nurses (LPNs) are nurses who are licensed by the State of Wisconsin as practical nurses. At this nursing home in 2007, there was:

• A turnover rate for full-time LPNs of 78%,

vs. 29% statewide and 28% across all nursing homes with 100-199 beds.

• A turnover rate for part-time LPNs of 400%,

vs. 53% statewide and 54% across all nursing homes with 100-199 beds.

• A retention rate for full-time LPNs of 100%,

vs. 80% statewide and 82% across all nursing homes with 100-199 beds.

• A retention rate for part-time LPNs of 50%,

vs. 65% statewide and 69% across all nursing homes with 100-199 beds.

Nursing assistants (NAs) provide direct personal care to residents, but are not registered nurses or licensed practical nurses. At this nursing home in 2007, there was:

• A turnover rate for full-time NAs of 88%,

vs. 42% statewide and 40% across all nursing homes with 100-199 beds.

• A turnover rate for part-time NAs of 40%,

vs. 72% statewide and 69% across all nursing homes with 100-199 beds.

• A retention rate for full-time NAs of 65%,

vs. 73% statewide and 74% across all nursing homes with 100-199 beds.

• A retention rate for part-time NAs of 72%,

vs. 57% statewide and 59% across all nursing homes with 100-199 beds.